

City of Redmond Supplier Registration Form

Please mail completed form to: City of Redmond, Attn: Purchasing M/S: 3SFN PO Box 97010, Redmond, WA 98073-9710 Or fax to: (425) 556-2185

Primary Product(s)/Services(s):		
		ral ID #:
How Long in Business:	years Dunn & Brad	lstreet #:
Company Name:		
Contact:	Phone:	Fax:
Website:	E-Mail Address:	
Correspondence Address:	Remit to Address:	Shipping & Terms
		FOB:
		-
Trade References: (please prov	ide company name/contact/phone	number)
1		
Names & Titles of Company O	wners/Officers:	
Type of Organization (check or	ne only):	
☐ Corporation ☐ Proprietorshi	p □Partnership □ Non Profit	Other:
Type of Business (check one on Manufacturer Distribut Contractor Consulta	tor/Wholesaler	☐ Dealer ☐ Service ecify):
Name & Title of Person(s) Aut	horized to Sign Bids:	
Do you provide any of the follo		
Surplus/Resale Products	Hazardous Product Disposal R	ecycled products
Do you accept any of the follow ☐ American Express ☐ VISA		Other:
I certify that the above informa	ation is correct:	
To addition to the feet of the con-	(signature)	(date) (tiving automatic notification of bids on the C

<u>NOTE:</u> Completed forms are kept on file for up to six years. It is the supplier's responsibility to ensure registrations are kept up-to-date.

Redmond website at: http://www.redmond.gov/insidecityhall/finance/purchasing.asp.